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**ORIGINAL**

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COMMERCE COMMISSION

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(File this application via e-docket, or if unable to do so, file one original verified application with the Chief Clerk.)

Docket No. \_\_\_\_\_  
CHIEF CLERK'S OFFICE  
ICC Office Use Only

Please provide the appropriate information in the ( ) areas in the heading below.

TeleUno, Inc.

Application for a certificate of  
Interexchange Authority  
to Operate as a Reseller of  
Telecommunications Services in the  
State of Illinois.

01-0386

**APPLICATION FOR CERTIFICATE TO BECOME A  
TELECOMMUNICATIONS CARRIER**  
(Use additional sheets as necessary.)

**GENERAL**

1. Applicant's Name (including d/b/a, if any) FEIN # 51-0401137

TeleUno, Inc.

Address: Street 2754 W. Atlantic Blvd., Suite 8

City Pompano Beach State/Zip FL 33069

2. Authority Requested: (Mark all that apply) 13-403 Facilities Based Interexchange

X 13-404 Resale of Local and/or Interexchange

13-405 Facilities Based Local

3. Request for waivers/variances: In applications for local exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 of Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and Part 735 are generally requested. Please indicate which waivers Applicant is requesting and explain why Applicant is requesting each waiver/variance.

X Part 710 Uniform System of Accounts for Telecommunications Carriers

X Part 735 Procedures Governing the Establishment of Credit, Billing,  
Deposits, Termination of Service and Issuance of Telephone  
Directories for Local Exchange Telecommunications Carriers in the  
State of Illinois

\_\_\_\_ Section 735.180 Directories

\_\_\_\_ Other

4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:
- (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
  - (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
  - (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
  - (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.
5. In what area of the state does the Applicant propose to provide service?

\_\_\_\_ The entire State of Illinois

6. Please attach a sheet designating contact persons to work with Staff on the following:

See Exhibit A

- a) issues related to processing this application
- b) consumer issues
- c) customer complaint resolution
- d) technical and service quality issues
- e) "tariff" and pricing issues
- f) 9-1-1 issues
- g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

7. Please check type of organization?

\_\_\_\_ Individual

X Corporation

\_\_\_\_ Partnership

Date corporation was formed 06/20/00

In what state? Delaware

\_\_\_\_ Other (Specify)

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois.

See Exhibit B

9. List jurisdictions in which Applicant is offering service(s).

\_\_\_\_ See Exhibit C

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

\_\_\_\_ YES (Please provide details)

X NO

11. Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?

\_\_\_\_ YES    X NO

If YES, describe fully. \_\_\_\_\_

12. Has Applicant provided service under any other name?

\_\_\_\_ YES    X NO

If YES, please list. \_\_\_\_\_

13. Will the Applicant keep its books and records in Illinois? \_\_\_\_ YES    X NO

If NO, permission pursuant to 83 Ill. Adm. Code Part 250 needs to be requested.

TeleUno, Inc. requests permission pursuant to 83 ILL. Adm. Code Part 250.40, to maintain the books and records of the corporation at its principal place of business in Pompano Beach, Florida.

#### MANAGERIAL

14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms.

See Exhibit D

15. List officers of Applicant.

_____	_____
<u>Avelino Iglesia, President</u>	_____
_____	_____

16. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? \_\_\_\_ YES    X NO

If YES, list entity. \_\_\_\_\_

17. How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)

Applicant bills directly on a monthly basis for its services. The billing statement contains  
customer's name, billing address, detailed accounting of calls, a toll-free number for billing  
inquiries, a billing rights summary and an address to which to send any disputes.

18. How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

Service and repair complaints are handled directly by TeleUno's underlying carrier.  
Global Crossing. Billing disputes may be addressed to the Customer Service Department  
via the toll-free number or in writing to the address listed on the back of the invoice.  
All complaints are investigated by TeleUno's in-house regulatory administrator in a  
timely manner. The customer is contacted and a mutual resolution is sought. Customer  
is notified of the availability of the Commission's assistance if resolution is not reached.

19. Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? ☒ YES ☐ NO

20. What telephone number(s) would a customer use to contact your company?

1-800-240-1109

21. Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?

☒ YES ☐ NO

22. Please describe applicant's procedures to prevent slamming and cramming of customers?

TeleUno is aware of the slamming and cramming procedures in all states in which it operates. The Company employs a third-party verification service to confirm each sale. Each verification call is recorded and the customer's desire to change carriers is confirmed, along with the customer's personal information, in accordance with FCC and state Regulations.

23. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 735, 755, 756, 757, 770, and 772?

☒ YES ☐ NO (If no, please provide an explanation.)

24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

☒ YES ☐ NO

## FINANCIAL

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

See Exhibit E

## TECHNICAL

26. Does Applicant utilize its own equipment and/or facilities? ☐ YES ☒ NO

If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

\_\_\_\_\_  
\_\_\_\_\_

If NO, which facility provider(s)'s services does the Applicant intend to use?

Global Crossing

27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).

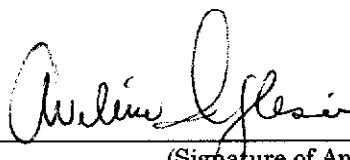
Applicant seeks authority to provide pre-subscribed "1+" resale of outbound long distance service, 800 inbound long distance service and calling card service in the State of Illinois.

28. Will technical personnel be available at all times to assist customers with service problems?

☐ YES ☒ NO

29. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? ☐ YES ☒ NO

Not Applicable.



(Signature of Applicant)

**VERIFICATION**

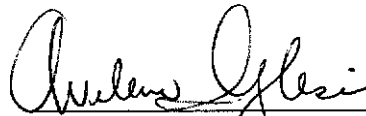
This application shall be verified under oath.

**OATH**

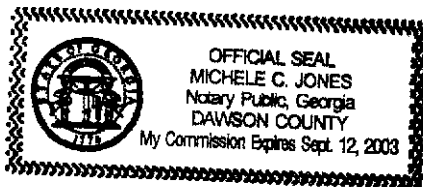
State of Georgia )  
 ) ss  
County of Dawson )

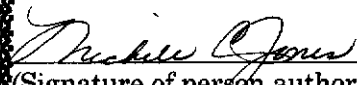
Avelino Iglesia makes oath and says that he is President  
of TeleUno, Inc.

that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.

  
Avelino Iglesia

Subscribed and sworn to before me, a Notary Public in the State and County above named, this  
8th day of May, 2001.



  
(Signature of person authorized to administer oath)